



P.O. Box 948  
West Plains, MO 65775

800-793-0010 • Fax 866-299-3303  
membership@airmedcarenetwork.com

May 18, 2018

Pliocene Ridge Community Services District  
Attn: Rae Bell Arbogast  
100 Pike City Road  
Pike, CA 95960

Plan Code: 11243

Dear Valued Business Partner,

For your records, we have enclosed a copy of the signed agreement between you and AirMedCare Network. If you have any questions, please feel free to give us a call.

Thank you for your continued support!

Best Regards,

Courtney Pelc  
AirMedCare Network  
Corporate Accounts Specialist  
Phone: (417) 255-2890  
Ext. 220140  
[courtney.pelc@airmedcarenetwork.com](mailto:courtney.pelc@airmedcarenetwork.com)





Plan Code: 11243

**AirMedCare Network Affinity Group Membership Discount  
For Pliocene Ridge Community Services District**

MAY 03 2018

**Organization:** Pliocene Ridge Community Services District  
**Physical Address:** 100 Pike City Rd.  
Pike, CA 95960  
**Contact:** Rae Bell Arbogast  
**Phone:** (530) 287-3223  
**Email:** plioceneridge@gmail.com

**Fax:**

**Participants:**

1. The Organization is partnering with AirMedCare Network participating providers, an alliance of affiliated air ambulance providers \*(each a "Company"), to offer special group membership pricing to individuals (Participants) who are affiliated with the Organization so they (and members of their household) can be members of the AirMedCare Network participating provider membership programs as provided in this Agreement. The Organization represents that it has at least 150 potential Participants, each representing a separate household. The Organization will either (1) provide a current list of potential Participants for direct marketing and verification or (2) facilitate marketing efforts to potential Participants and verify the affiliation status of a Participant when a completed membership application is received.
2. A Participant must be actively affiliated with the Organization (as a member or similar relationship) when the membership fee is paid by such Participant.

**Pricing:**

- The membership fees to be paid by the Participants who decide to complete a membership application are:

Monthly Recurring	Annual Membership	3 Year Membership	5 Year Membership	10 Year Membership
\$9	\$65	\$185	\$300	\$575

- Membership fees may be changed at any time with at least 10 days' prior written notice to the Organization. Multiple year memberships are not available in all areas.

**General Provisions:**

1. Participant memberships will be effective upon AirMedCare Network's receipt of (a) this Agreement signed by the Organization, (b) payment as provided above and (c) membership applications completed by the Participants. Memberships will automatically expire without notice (i) after one year for annual payment plans, and (ii) after one month for monthly payment plans; however, a 60 day grace period will apply if a membership renewal payment is received within such grace period. No refunds.
2. AirMedCare Network agrees that Participant Lists and membership applications (a) will be used by AirMedCare Network only for the purpose of delivering AirMedCare Network services, (b) will be treated like any other AirMedCare Network confidential information and (c) will not be used, sold or shared with any third party inconsistent with this provision.
3. This Agreement will automatically renew on its anniversary date (annually or monthly, as applicable), if (a) no termination notice has been sent by either party and (b) payment for the renewal period is received by AirMedCare Network before expiration of the grace period. Either party may terminate this Agreement at any time and for any reason with 30 days prior written notice to the other party, but termination will not affect issued memberships.



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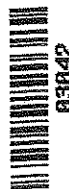
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### Terms and Conditions

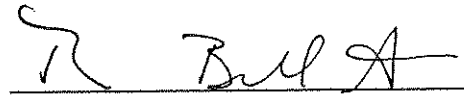
AirMedCare Network is an alliance of affiliated air ambulance providers\* (each a "Company"). An AirMedCare Network membership automatically enrolls you as a member in each Company's membership program. Membership ensures the patient will have no out-of-pocket flight expenses if flown by a Company by providing prepaid protection against a Company's air ambulance costs that are not covered by a member's insurance or other benefits or third party responsibility, subject to the following terms and conditions:

1. Patient transport will be to the closest appropriate medical facility for medical conditions that are deemed by AMCN Provider attending medical professionals to be life- or limb-threatening, or that could lead to permanent disability, and which require emergency air ambulance transport. A patient's medical condition, not membership status, will dictate whether or not air transportation is appropriate and required. Under all circumstances, an AMCN Provider retains the sole right and responsibility to determine whether or not a patient is flown.
2. AMCN Provider air ambulance services may not be available when requested due to factors beyond its control, such as use of the appropriate aircraft by another patient or other circumstances governed by operational requirements or restrictions including, but not limited to, equipment manufacturer limitations, governmental regulations, maintenance requirements, patient condition, age or size, or weather conditions. FAA restrictions prohibit most AMCN Provider aircraft from flying in inclement weather conditions. The primary determinant of whether to accept a flight is always the safety of the patient and medical flight crews. Emergent ground ambulance transport of a member by an AMCN Provider will be covered under the same terms and conditions.
3. Members who have insurance or other benefits, or third party responsibility claims, that cover the cost of ambulance services are financially liable for the cost of AMCN Provider services up to the limit of any such available coverage. In return for payment of the membership fee, the AMCN Provider will consider its air ambulance costs that are not covered by any insurance, benefits or third party responsibility available to the member to have been fully prepaid. The AMCN Provider reserves the right to bill directly any appropriate insurance, benefits provider or third party for services rendered, and members authorize their insurers, benefits providers and responsible third parties to pay any covered amounts directly to the AMCN Provider. Members agree to remit to the AMCN Provider any payment received from insurance or benefit providers or any third party for air medical services provided by the AMCN Provider, not to exceed regular charges. Neither the Company nor AirMedCare Network is an insurance company. Membership is not an insurance policy and cannot be considered as a secondary insurance coverage or a supplement to any insurance coverage. **Neither the Company nor AirMedCare Network will be responsible for payment for services provided by another ambulance service.**
4. Membership starts 15 days after the Company receives a complete application with full payment; however, the waiting period will be waived for unforeseen events occurring during such time. Members must be natural persons. Memberships are non-refundable and non-transferable.
5. Some state laws prohibit Medicaid beneficiaries from being offered membership or being accepted into membership programs. By applying, members certify to the Company that they are not Medicaid beneficiaries.
6. These terms and conditions supersede all previous terms and conditions between a member and the Company or AirMedCare Network, including any other writings, or verbal representations, relating to the terms and conditions of membership.

\*Air Evac EMS, Inc. / Guardian Flight LLC / Med-Trans Corporation / REACH Air Medical Services, LLC — These terms and conditions apply to all AirMedCare Network participating provider membership programs, regardless of which participating provider transports you.



Agreed to by:


  
Signature

Rae Bell Arbogast  
Printed Name

Secretary  
Title

Pliocene Ridge Comm. Services Dist.  
Organization Name

4/30/18  
Date

  
Signature

Keith Hovey MAY 10 2018  
Printed Name

Vice President AMCN  
Title

Membership  
Division

Date

MAY 03 2018

Initial RA



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